# **DR-2 Disclosure Summary Page**

IOWA MEDICAL F	POLITICAL ACTION CO	MMITTEE	Status:		Filed
Committee Type:	Iowa PAC		Statutory Du	ue Date	5/19/2010
County:	Polk		Adjusted Du	ie Date	
District:	0		Filed Date		5/18/2010 12:46:51 PM
Committee Code:	6073		Postmark Da	ate	
Political Party:	Not Available		Amendment	Date	
Report Date:	2010	Candi	date Name:		•

#### **Treasurer**

Last Name: LARIVIERE	First Name:	GENE		: R
Address: 1001 GRAND AVENUE				
City: WEST DES MOINES State: IA	Zip Code:	50265	<b>Phone:</b> 515-223	-1401
E-Mail: dpotter@iowamedical.org	•			

# **Chairperson**

Last Name: ABRAMS		First Name:	MICHAEL		MI: D
Address: 1001 GRAND AVENUE					
City: WEST DES MOINES S	State: IA	Zip Code:	50265	<b>Phone:</b> 515-2	23-1401
E-Mail: mabrams@iowamedical.org					

## **Statement of Cash On Hand**

Cash on Hand at Start of Period	\$66,783.38
Schedule A: Cash Contributions Total	\$34,227.92
Schedule F1: Loans Received Total	\$0.00
Schedule H2: Campaign Property Sales	\$0.00
Sub-Total	\$101,011.30
Schedule B: Expenditure Total	\$13,700.00
Schedule F2: Cash Loan Repayments	\$0.00

## **Additional Assets and Liabilities**

Loans in Place at Start of Period	\$0.00
Schedule D: Unpaid Bills	\$0.00
Schedule E: In-Kind Contributions	\$0.00
Schedule F2: Forgiven Loans	\$0.00
Schedule F2: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown	No
Schedule H1: Campaign Property Value	\$0.00